

BEST AVAILABLE COPY

NT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

PC25226A

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|-----------------------|------------|-------------------------------------|
| NUMBER FILED | 16 | |
| NUMBER EXTRA | | |
| AGEAD E CLAIMS | 24 | minus 20 = 4 |
| NT C MS | 1 | minus 3 = 0 |
| EPE ENT CLAIM PRESENT | | <input checked="" type="checkbox"/> |

ence i column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE | FEE | | RATE | FEE |
|-----------|--------|----|-----------|--------|
| BASIC FEE | 375.00 | OR | BASIC FEE | 750.00 |
| X\$ 9= | | OR | X\$18= | 72.00 |
| X42= | | OR | X84= | |
| +140= | | OR | +280= | 280.00 |
| TOTAL | | OR | TOTAL | |

CLAIMS AS AMENDED - PART II

| (Column 1) | (Column 2) | (Column 3) |
|--|------------------------------------|---------------|
| CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| 18 | 24 | |
| 3 | 3 | |
| ATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | |

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

| RATE | ADDI-TIONAL FEE | | RATE | ADDI-TIONAL FEE |
|------------------|-----------------|----|------------------|-----------------|
| X\$ 9= | | OR | X\$18= | |
| X42= | | OR | X84= | |
| +140= | | OR | +280= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

10-17-05

| (Column 1) | (Column 2) | (Column 3) |
|--|------------------------------------|---------------|
| CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| 18 | 24 | |
| 3 | 3 | |
| ATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | |

| RATE | ADDI-TIONAL FEE | | RATE | ADDI-TIONAL FEE |
|------------------|-----------------|----|------------------|-----------------|
| X\$ 9= | | OR | X\$18= | |
| X42= | | OR | X84= | |
| +140= | | OR | +280= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

| (Column 1) | (Column 2) | (Column 3) |
|--|------------------------------------|---------------|
| CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| MinL | | |
| Minus | | |
| ATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | |

| RATE | ADDI-TIONAL FEE | | RATE | ADDI-TIONAL FEE |
|------------------|-----------------|----|------------------|-----------------|
| X\$ 9= | | OR | X\$18= | |
| X42= | | OR | X84= | |
| +140= | | OR | +280= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

is less than the entry in column 2, write "0" in column 3.
 Previously Paid For IN THIS SPACE is less than 20, enter "20."
 Previously Paid For IN THIS SPACE is less than 3, enter "3."
 Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

10/634,709